

Image# 201701309041538613

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) THOMAS, MARY, , ,		
(b) Address (number and street) 2482 GOLDENROD WAY		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code TALLAHASSEE FL 32311		2. Candidate's FEC Identification Number H6FL02190
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate FL 02	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) MARY THOMAS FOR CONGRESS		
(b) Address (number and street) 3689 COOLIDGE COURT SUITE 6		
(c) City, State, and ZIP Code TALLAHASSEE FL 32311		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

Signature of Candidate Thomas, Mary, , ,  [Electronically Filed]	Date 01/30/2017
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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